

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000024338

FILED
Apr 29, 2011
Secretary of State

Entity Name: RIVERCITY COMMUNITY PHARMACY AND WELLNESS CENTER, LLC

Current Principal Place of Business:

7278 LEM TURNER ROAD
JACKSONVILLE, FL 32208

New Principal Place of Business:

3758 MORNING GLORY ROAD
JACKSONVILLE, FL 32210

Current Mailing Address:

P O BOX 7205
JACKSONVILLE, FL 32238

New Mailing Address:

3758 MORNING GLORY ROAD
JACKSONVILLE, FL 32210

FEI Number: 26-2120889

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIVERS, YOLANDA L
3758 MORNING GLORY ROD
JACKSONVILLE, FL 32210 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: RIVERS, YOLANDA L
Address: 3758 MORNING GLORY ROAD
City-St-Zip: JACKSONVILLE, FL 32210

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: YOLANDA RIVERS

MGR

04/29/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date